

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

Apparatus and Methods Usable In Connection
With Dispensing Flexible Sheet Material From A
Roll

Attorney Docket Number::

000242.00105

Request for Early Publication?::

NO

Request for Non-Publication?::

NO

Suggested Drawing Figure::

1

Total Drawing Sheets::

21

Small Entity?::

NO

Latin name::

Variety denomination name::

Petition included?::

NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

NO

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.
Status:: Full Capacity
Given Name:: John
Middle Name:: S.
Family Name:: Formon
Name Suffix::
City of Residence:: Orange Park
State or Province of Residence:: FL
Country of Residence::
Street of mailing address:: 565 Golden Links Drive
City of mailing address:: Orange Park
State or Province of mailing address:: FL
Country of mailing address::
Postal or Zip Code of mailing address:: 32073

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.
Status:: Full Capacity
Given Name:: Andrew
Middle Name:: R.
Family Name:: Morris
Name Suffix::
City of Residence:: Green Cove Springs
State or Province of Residence:: FL
Country of Residence::
Street of mailing address:: 3531 Olympic Dr.
City of mailing address:: Green Cove Springs
State or Province of mailing address:: FL

Country of mailing address::

Postal or Zip Code of mailing address:: 32043

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.

Status:: Full Capacity

Given Name:: James

Middle Name:: H.

Family Name:: Murphy

Name Suffix::

City of Residence:: St. Augustine

State or Province of Residence:: FL

Country of Residence::

Street of mailing address:: 14 Versaggi Rd.

City of mailing address:: St. Augustine

State or Province of mailing address:: FL

Country of mailing address::

Postal or Zip Code of mailing address:: 32080

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.

Status:: Full Capacity

Given Name:: Bruce

Middle Name:: T.

Family Name:: Boone

Name Suffix::

City of Residence:: Orange Park

State or Province of Residence:: FL

Country of Residence::

Street of mailing address:: 1258 Crepe Myrtle Court

City of mailing address:: Orange Park
State or Province of mailing address:: FL
Country of mailing address::
Postal or Zip Code of mailing address:: 32073

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.
Status:: Full Capacity
Given Name:: Michael
Middle Name:: A.
Family Name:: Susi
Name Suffix::
City of Residence:: Clinton
State or Province of Residence:: MA
Country of Residence::
Street of mailing address:: 203 Union St.
City of mailing address:: Clinton
State or Province of mailing address:: MA
Country of mailing address::
Postal or Zip Code of mailing address:: 01510

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.
Status:: Full Capacity
Given Name:: Paul
Middle Name::
Family Name:: Dowd
Name Suffix::
City of Residence:: Bronxville

State or Province of Residence:: NY
Country of Residence::
Street of mailing address:: 830 Bronx River Road
5B
City of mailing address:: Bronxville
State or Province of mailing address:: NY
Country of mailing address::
Postal or Zip Code of mailing address:: 10708

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.
Status:: Full Capacity
Given Name:: Will
Middle Name::
Family Name:: Isaksson
Name Suffix::
City of Residence:: New York
State or Province of Residence:: NY
Country of Residence::
Street of mailing address:: 280 Mott St.
City of mailing address:: New York
State or Province of mailing address:: NY
Country of mailing address::
Postal or Zip Code of mailing address:: 10012

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.
Status:: Full Capacity
Given Name:: David
Middle Name::

Family Name:: Gahris
 Name Suffix::
 City of Residence:: Auburn
 State or Province of Residence:: ME
 Country of Residence::
 Street of mailing address:: 30 Tailwind Ct.
 Apt. 63C
 City of mailing address:: Auburn
 State or Province of mailing address:: ME
 Country of mailing address::
 Postal or Zip Code of mailing address:: 04210

Correspondence Information

Correspondence Customer Number:: 22907

Representative Information

Representative Customer Number:: 22907

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application			

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Georgia-Pacific Corporation
Street of mailing address:: 133 Peachtree Street NE
City of mailing address:: Atlanta
State or Province of mailing address:: GA
Country of mailing address::
Postal or Zip Code of mailing address:: 30303

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